	Case 08-15782-mkn	Doc 5	Entered 06/02/08 18:18:33	Page 1 of 7
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	" P P: 1	
In re J	eff P Pienta	According to the calculations required by this statement:
	Debtor(s)	■ The applicable commitment period is 3 years.
Case Num	· · · · · · · · · · · · · · · · · · ·	☐ The applicable commitment period is 5 years.
	(If known)	☐ Disposable income is determined under § 1325(b)(3).
		■ Disposable income is not determined under § 1325(b)(3).
		(Check the boxes as directed in Lines 17 and 23 of this statement.)

## CHAPTER 13 STATEMENT OF CURRENT MONTHLY INCOME AND CALCULATION OF COMMITMENT PERIOD AND DISPOSABLE INCOME

In addition to Schedules I and J, this statement must be completed by every individual chapter 13 debtor, whether or not filing jointly. Joint debtors may complete one statement only.

	Part I. REPORT OF INCOME	1				
	Marital/filing status. Check the box that applies and complete the balance of thi		ment as directed			
1	a. Unmarried. Complete only Column A ("Debtor's Income") for Lines 2-1	•	ment as affected.			
1	b.   Married. Complete both Column A ("Debtor's Income") and Column B		ne") for Lines 2-10			
	All figures must reflect average monthly income received from all sources, derive	ed during the six	Column A	Column B		
	calendar months prior to filing the bankruptcy case, ending on the last day of the		Debtor's	Spouse's		
	the filing. If the amount of monthly income varied during the six months, you m six-month total by six, and enter the result on the appropriate line.	iust divide the	Income	Income		
2	Gross wages, salary, tips, bonuses, overtime, commissions.		\$ 4,211.00	\$		
	<b>Income from the operation of a business, profession, or farm.</b> Subtract Line b	from Line a and	4,211.00	ψ		
	enter the difference in the appropriate column(s) of Line 3. If you operate more the	than one business,				
	profession or farm, enter aggregate numbers and provide details on an attachmen					
2	number less than zero. Do not include any part of the business expenses enter a deduction in Part IV.	red on Line b as				
3	Debtor	Spouse				
	a. Gross receipts \$ 0.00 \$	S P * * * * * * * * * * * * * * * * * *				
	b. Ordinary and necessary business expenses \$ 0.00 \$					
	c. Business income Subtract Line b from Line a		\$ 0.00	\$		
	Rents and other real property income. Subtract Line b from Line a and enter the difference in					
	the appropriate column(s) of Line 4. Do not enter a number less than zero. <b>Do not include any</b> part of the operating expenses entered on Line b as a deduction in Part IV.					
4	Debtor	Spouse				
7	a. Gross receipts \$ 0.00 \$	Spouse				
	b. Ordinary and necessary operating expenses \$ 0.00 \$					
	c. Rent and other real property income Subtract Line b from Line a	ı	\$ 0.00	\$		
5	Interest, dividends, and royalties. \$ 0.00 \$					
6	Pension and retirement income. \$ 0.00 \$					
	Any amounts paid by another person or entity, on a regular basis, for the household					
7	expenses of the debtor or the debtor's dependents, including child support paid for that purpose. Do not include alimony or separate maintenance payments or amounts paid by the					
debtor's spouse. \$ 0.00 \$						
	<b>Unemployment compensation.</b> Enter the amount in the appropriate column(s) or					
	However, if you contend that unemployment compensation received by you or yo benefit under the Social Security Act, do not list the amount of such compensation	our spouse was a				
8	or B, but instead state the amount in the space below:	on in Column A				
Unemployment compensation claimed to						
	be a benefit under the Social Security Act Debtor \$ 0.00 Spouse \$		\$ 0.00	\$		

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9	Income from all other sources. Specify source and amount. If necessary, list additional sources on a separate page. Total and enter on Line 9. Do not include alimony or separate maintenance payments paid by your spouse, but include all other payments of alimony or separate maintenance. Do not include any benefits received under the Social Security Act or payments received as a victim of a war crime, crime against humanity, or as a victim of international or domestic terrorism.			
	Debtor   Spouse			
	b. \$ 1,000.0	00   \$		
10	Subtotal. Add Lines 2 thru 9 in Column A, and, if Column B is completed, add Lines 2 through 9 in Column B. Enter the total(s).  5,211.			
11	<b>Total.</b> If Column B has been completed, add Line 10, Column A to Line 10, Column B, and enter the total. If Column B has not been completed, enter the amount from Line 10, Column A.	5,211.00		
	Part II. CALCULATION OF § 1325(b)(4) COMMITMENT PERIOD			
12	Enter the amount from Line 11	\$ 5,211.00		
13	Marital Adjustment. If you are married, but are not filing jointly with your spouse, AND if you contend that calculation of the commitment period under § 1325(b)(4) does not require inclusion of the income of your spouse, enter on Line 13 the amount of the income listed in Line 10, Column B that was NOT paid on a regular basis for the household expenses of you or your dependents and specify, in the lines below, the basis for excluding this income (such as payment of the spouse's tax liability or the spouse's support of persons other than the debtor or the debtor's dependents) and the amount of income devoted to each purpose. If necessary, list additional adjustments on a separate page. If the conditions for entering this adjustment do not apply, enter zero.			
	a. \$ b. \$			
	c. \$ Total and enter on Line 13	\$ 0.00		
14	Subtract Line 13 from Line 12 and enter the result.	\$ 5,211.00		
15	Annualized current monthly income for § 1325(b)(4). Multiply the amount from Line 14 by the number 12 and enter the result.	\$ 62,532.00		
16	<b>Applicable median family income.</b> Enter the median family income for applicable state and household size. (This information is available by family size at <a href="https://www.usdoj.gov/ust/">www.usdoj.gov/ust/</a> or from the clerk of the bankruptcy court.)			
	a. Enter debtor's state of residence: NV b. Enter debtor's household size: 3	\$ 65,032.00		
	Application of § 1325(b)(4). Check the applicable box and proceed as directed.	,		
17	■ The amount on Line 15 is less than the amount on Line 16. Check the box for "The applicable commitment period is 3 years" at the top of page 1 of this statement and continue with this statement.			
	☐ The amount on Line 15 is not less than the amount on Line 16. Check the box for "The applicable commitment period is 5 years" at the top of page 1 of this statement and continue with this statement.			
	Part III. APPLICATION OF § 1325(b)(3) FOR DETERMINING DISPOSABLE INCOME			
18	Enter the amount from Line 11.	\$ 5,211.00		
19	Marital Adjustment. If you are married, but are not filing jointly with your spouse, enter on Line 19 the total of any income listed in Line 10, Column B that was NOT paid on a regular basis for the household expenses of the debtor or the debtor's dependents. Specify in the lines below the basis for excluding the Column B income(such as payment of the spouse's tax liability or the spouse's support of persons other than the debtor or the debtor's dependents) and the amount of income devoted to each purpose. If necessary, list additional adjustments on a separate page. If the conditions for entering this adjustment do not apply, enter zero.			
	a. \$ b. \$			
	c. \$ Total and enter on Line 19.	_		
20	Current monthly income for § 1325(b)(3). Subtract Line 19 from Line 18 and enter the result.	\$ 0.00 \$ 5,211.00		

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21	Annualized current monthly income for § 1325(b)(3). Multiply the amount from Line 20 by the number 12 and enter the result.				\$	62,532.00	
22	Applicable median family income. Enter the amount from Line 16.					\$	65,032.00
	Application of § 1325(b)(3). Check the	ne applicable box and pro	oceed as	directed.			
23	☐ The amount on Line 21 is more the 1325(b)(3)" at the top of page 1 of					ined un	ıder §
	■ The amount on Line 21 is not mo 1325(b)(3)" at the top of page 1 of						
	Part IV. CAL	CULATION OF I	DEDU	CTIONS FR	OM INCOME		
	Subpart A: Dedu	ctions under Standar	ds of tl	ne Internal Reve	nue Service (IRS)		
24A	National Standards: food, apparel at Enter in Line 24A the "Total" amount applicable household size. (This inforbankruptcy court.)	from IRS National Stand	lards for	Allowable Living	Expenses for the	\$	
National Standards: health care. Enter in Line a1 below the amount from IRS National Standards for Out-of-Pocket Health Care for persons under 65 years of age, and in Line a2 the IRS National Standards for Out-of-Pocket Health Care for persons 65 years of age or older. (This information is available at www.usdoj.gov/ust/ or from the clerk of the bankruptcy court.) Enter in Line b1 the number of members of your household who are under 65 years of age, and enter in Line b2 the number of members of your household who are 65 years of age or older. (The total number of household members must be the same as the number stated in Line 16b.) Multiply Line a1 by Line b1 to obtain a total amount for household members under 65, and enter the result in Line c1. Multiply Line a2 by Line b2 to obtain a total amount for household members 65 and older, and enter the result in Line c2. Add Lines c1 and c2 to obtain a total health care amount, and enter the result in Line 24B.							
	Household members under 65 years	s of age Hou	sehold	members 65 years	of age or older		
	a1. Allowance per member	a2.	2. Allowance per member				
	b1. Number of members	b2.	Numb	er of members			
	c1. Subtotal	c2.	Subtotal			\$	
25A	Local Standards: housing and utilities; non-mortgage expenses. Enter the amount of the IRS Housing and Utilities Standards; non-mortgage expenses for the applicable county and household size. (This information is available at <a href="www.usdoj.gov/ust/">www.usdoj.gov/ust/</a> or from the clerk of the bankruptcy court).				\$		
25B	Local Standards: housing and utilities; mortgage/rent expense. Enter, in Line a below, the amount of the IRS Housing and Utilities Standards; mortgage/rent expense for your county and household size (this information is available at <a href="https://www.usdoj.gov/ust/">www.usdoj.gov/ust/</a> or from the clerk of the bankruptcy court); enter on Line b the total of the Average Monthly Payments for any debts secured by your home, as stated in Line 47; subtract Line b from Line a and enter the result in Line 25B. Do not enter an amount less than zero.    a.   IRS Housing and Utilities Standards; mortgage/rent Expense   \$   b.   Average Monthly Payment for any debts secured by your home, if any, as stated in Line 47   \$   c.   Net mortgage/rental expense   Subtract Line b from Line a.			\$			
Local Standards: housing and utilities; adjustment. If you contend that the process set out in Lines 25A and 25B does not accurately compute the allowance to which you are entitled under the IRS Housing and Utilities Standards, enter any additional amount to which you contend you are entitled, and state the basis for your contention in the space below:				s			

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**B22C** (Official Form 22C) (Chapter 13) (01/08) 4 Local Standards: transportation; vehicle operation/public transportation expense. You are entitled to an expense allowance in this category regardless of whether you pay the expenses of operating a vehicle and regardless of whether you use public transportation. Check the number of vehicles for which you pay the operating expenses or for which the operating expenses are 27A included as a contribution to your household expenses in Line 7.  $\square$  0  $\square$  1  $\square$  2 or more. If you checked 0, enter on Line 27A the "Public Transportation" amount from IRS Local Standards: Transportation. If you checked 1 or 2 or more, enter on Line 27A the "Operating Costs" amount from IRS Local Standards: Transportation for the applicable number of vehicles in the applicable Metropolitan Statistical Area or Census Region. (These amounts are available at www.usdoj.gov/ust/ or from the clerk of the bankruptcy court.) Local Standards: transportation; additional public transportation expense. If you pay the operating expenses for a vehicle and also use public transportation, and you contend that you are entitled to an additional deduction for 27B your public transportation expenses, enter on Line 27B the "Public Transportation" amount from the IRS Local Standards: Transportation. (This amount is available at www.usdoj.gov/ust/ or from the clerk of the bankruptcy Local Standards: transportation ownership/lease expense; Vehicle 1. Check the number of vehicles for which you claim an ownership/lease expense. (You may not claim an ownership/lease expense for more than two vehicles.)  $\square$  1  $\square$  2 or more. Enter, in Line a below, the "Ownership Costs" for "One Car" from the IRS Local Standards: Transportation (available at www.usdoj.gov/ust/ or from the clerk of the bankruptcy court); enter in Line b the total of the Average Monthly Payments for any debts secured by Vehicle 1, as stated in Line 47; subtract Line b from Line a and enter 28 the result in Line 28. Do not enter an amount less than zero. IRS Transportation Standards, Ownership Costs Average Monthly Payment for any debts secured by Vehicle 1, as stated in Line 47 Net ownership/lease expense for Vehicle 1 Subtract Line b from Line a. Local Standards: transportation ownership/lease expense; Vehicle 2. Complete this Line only if you checked the "2 or more" Box in Line 28. Enter, in Line a below, the "Ownership Costs" for "One Car" from the IRS Local Standards: Transportation (available at www.usdoj.gov/ust/ or from the clerk of the bankruptcy court); enter in Line b the total of the Average Monthly Payments for any debts secured by Vehicle 2, as stated in Line 47; subtract Line b from Line a and enter 29 the result in Line 29. Do not enter an amount less than zero. IRS Transportation Standards, Ownership Costs \$ Average Monthly Payment for any debts secured by Vehicle 2, as stated in Line 47 Net ownership/lease expense for Vehicle 2 Subtract Line b from Line a. Other Necessary Expenses: taxes. Enter the total average monthly expense that you actually incur for all federal, 30 state, and local taxes, other than real estate and sales taxes, such as income taxes, self employment taxes, social security taxes, and Medicare taxes. Do not include real estate or sales taxes. Other Necessary Expenses: mandatory deductions for employment. Enter the total average monthly payroll 31 deductions that are required for your employment, such as mandatory retirement contributions, union dues, and uniform costs. Do not include discretionary amounts, such as voluntary 401(k) contributions. Other Necessary Expenses: life insurance. Enter total average monthly premiums that you actually pay for term 32 life insurance for yourself. Do not include premiums for insurance on your dependents, for whole life or for any other form of insurance. Other Necessary Expenses: court-ordered payments. Enter the total monthly amount that you are required to 33 pay pursuant to the order of a court or administrative agency, such as spousal or child support payments. Do not include payments on past due obligations included in line 49. Other Necessary Expenses: education for employment or for a physically or mentally challenged child. Enter the total average monthly amount that you actually expend for education that is a condition of employment and for 34 education that is required for a physically or mentally challenged dependent child for whom no public education providing similar services is available.

Other Necessary Expenses: childcare. Enter the total average monthly amount that you actually expend on

childcare - such as baby-sitting, day care, nursery and preschool. Do not include other educational payments.

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36	Other Necessary Expenses: health care. Enter the average monthly amount that you actually expend on health care that is required for the health and welfare of yourself or your dependents, that is not reimbursed by insurance or paid by a health savings account, and that is in excess of the amount entered in Line 24B. Do not include payments for health insurance or health savings accounts listed in Line 39.				
37		our basic home telephone and cell phone service - such as atternet service-to the extent necessary for your health and	\$		
38	Total Expenses Allowed under IRS Standards. Enter	the total of Lines 24 through 37.	\$		
	Subpart B: Additio	nal Living Expense Deductions	*		
	Note: Do not include any exp	penses that you have listed in Lines 24-37			
	Health Insurance, Disability Insurance, and Health Sa the categories set out in lines a-c below that are reasonal dependents	avings Account Expenses. List the monthly expenses in oly necessary for yourself, your spouse, or your			
39	a. Health Insurance	\$			
	b. Disability Insurance	\$			
	c. Health Savings Account	\$	\$		
	Total and enter on Line 39  If you do not actually expend this total amount, state your actual total average monthly expenditures in the space below:  \$				
40	Continued contributions to the care of household or family members. Enter the total average actual monthly expenses that you will continue to pay for the reasonable and necessary care and support of an elderly, chronically ill, or disabled member of your household or member of your immediate family who is unable to pay for such expenses. Do not include payments listed in Line 34.				
41	Protection against family violence. Enter the total average reasonably necessary monthly expenses that you actually incur to maintain the safety of your family under the Family Violence Prevention and Services Act or other applicable federal law. The nature of these expenses is required to be kept confidential by the court.				
42	Home energy costs. Enter the total average monthly amount, in excess of the allowance specified by IRS Local Standards for Housing and Utilities, that you actually expend for home energy costs. You must provide your case trustee with documentation of your actual expenses, and you must demonstrate that the additional amount claimed is reasonable and necessary.				
43	Education expenses for dependent children under 18. Enter the total average monthly expenses that you actually incur, not to exceed \$137.50 per child, for attendance at a private or public elementary or secondary school by your dependent children less than 18 years of age. You must provide your case trustee with documentation of your actual expenses, and you must explain why the amount claimed is reasonable and necessary and not already accounted for in the IRS Standards.				
44	Additional food and clothing expense. Enter the total average monthly amount by which your food and clothing expenses exceed the combined allowances for food and clothing (apparel and services) in the IRS National Standards, not to exceed 5% of those combined allowances. (This information is available at <a href="https://www.usdoj.gov/ust/">www.usdoj.gov/ust/</a> or from the clerk of the bankruptcy court.) You must demonstrate that the additional amount claimed is reasonable and necessary.				
45	Charitable contributions. Enter the amount reasonably necessary for you to expend each month on charitable				
46	Total Additional Expense Deductions under § 707(b). Enter the total of Lines 39 through 45.				

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			Subpart C: Deductions for De	ebt I	Payment			
47	own, check sched case,	list the name of creditor, ide whether the payment included as contractually due to	ims. For each of your debts that is secured that it is secured. The Average Month each Secured Creditor in the 60 months for a list additional entries on a separate page.	the A nly P ollow	verage Monthly ayment is the to ing the filing of	Payment, and tal of all amounts the bankruptcy		
		Name of Creditor  Property Securing the Debt  Average Monthly include taxes or insurance						
	a.			\$	otal: Add Lines	□yes □no	\$	
48	motor your paym sums	r vehicle, or other property r deduction 1/60th of any amo ents listed in Line 47, in ord in default that must be paid ollowing chart. If necessary,	ms. If any of debts listed in Line 47 are selected are selected are selected are selected are selected are support or the support of the unit (the "cure amount") that you must pay ler to maintain possession of the property. In order to avoid repossession or foreclost list additional entries on a separate page.	f you the The	or dependents, you creditor in addit cure amount work ist and total any	ou may include in ion to the uld include any such amounts in		
	a.	Name of Creditor	Property Securing the Debt		\$	he Cure Amount		
						Γotal: Add Lines	\$	
Payments on prepetition priority claims. Enter the total amount, divided by 60, of all priority claims, such as priority tax, child support and alimony claims, for which you were liable at the time of your bankruptcy filing. Do not include current obligations, such as those set out in Line 33.								
	Chap result	oter 13 administrative expering administrative expense.	nses. Multiply the amount in Line a by the	amo	ount in Line b, a	nd enter the		
	a.		ly Chapter 13 plan payment.	\$				
50	b. Current multiplier for your district as determined under schedules issued by the Executive Office for United States Trustees. (This information is available at <a href="https://www.usdoj.gov/ust/">www.usdoj.gov/ust/</a> or from the clerk of							
	the bankruptcy court.) c. Average monthly administrative expense of Chapter 13 case			To	tal: Multiply Li	nes a and b	\$	
51	<b>Total Deductions for Debt Payment.</b> Enter the total of Lines 47 through 50.				\$			
			Subpart D: Total Deductions f	ron	n Income			
52	Total	of all deductions from inc	ome. Enter the total of Lines 38, 46, and 5	51.			\$	
		Part V. DETER	MINATION OF DISPOSABLE	INC	OME UNDI	ER § 1325(b)(2)	1	
53	Total current monthly income. Enter the amount from Line 20.			\$				
Support income. Enter the monthly average of any child support payments, foster care payments, or disability payments for a dependent child, reported in Part I, that you received in accordance with applicable nonbankruptcy law, to the extent reasonably necessary to be expended for such child.				\$				
55	Qualified retirement deductions. Enter the monthly total of (a) all amounts withheld by your employer from wages as contributions for qualified retirement plans, as specified in § 541(b)(7) and (b) all required repayments of loans from retirement plans, as specified in § 362(b)(19).							
56	Total of all deductions allowed under § 707(b)(2). Enter the amount from Line 52.							

## **B22C** (Official Form 22C) (Chapter 13) (01/08)

	<b>Deduction for special circumstances.</b> If there are special circumstances is no reasonable alternative, describe the special circumstances if necessary, list additional entries on a separate page. Total	nstances and the resulting expenses in lines a-c below.
	provide your case trustee with documentation of these ex of the special circumstances that make such expense nece	penses and you must provide a detailed explanation
57	Nature of special circumstances	Amount of Expense
	a.	\$
	b.	\$
	c.	\$
		Total: Add Lines
58	<b>Total adjustments to determine disposable income.</b> Add result.	the amounts on Lines 54, 55, 56, and 57 and enter the
59	Monthly Disposable Income Under § 1325(b)(2). Subtract	t Line 58 from Line 53 and enter the result.
	Part VI. ADDITIO	NAL EXPENSE CLAIMS
	of you and your family and that you contend should be an ac	not otherwise stated in this form, that are required for the health and welfare dditional deduction from your current monthly income under § a separate page. All figures should reflect your average monthly expense for
60	Expense Description	Monthly Amount
00	a.	\$
	b.	\$
	c.	\$
	d. Total: Add I	ines a, b, c and d \$
	1 Otal. Add L	nies a, b, c and d
	Part VII.	VERIFICATION
	I declare under penalty of perjury that the information provimust sign.)	ded in this statement is true and correct. (If this is a joint case, both debtors
61	Date: <b>June 2, 2008</b>	Signature: /s/ Jeff P Pienta
		Jeff P Pienta (Debtor)